

Work Order ID 99779

April-11-13 3:39:27 PM

99779

Page 1

Item ID: D3295-041

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Floor Window

Start Date: 4/11/13 Start Qty: 6.00

6

Cust Item ID:

Required Date: 4/11/13 Req'd Qty: 6.00

6

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 13-04-16 Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D3295	E

100 FLOW WATER JET 0.00

100

Waterjet

FLOW CNC Waterjet

Memo

0.00

Lexon .125"

ENSURE PLASTIC BLOCK ARE ON TABLE BEFORE CUTTING PARTS

1-Cut D3295-1 as per Dwg D3295

Dwg Rev: E

Prog Rev: E

2-Remove plastic and wrap in saran wrap.

3-Deburr if necessary

8 0 JmB-5-a

110 QC2- Inspect parts off machine FAI/FAIB 0.00

110

QC

Memo

0.00

Quality Control

8 0 JmB-5-a

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: AK Date: 13/05/10QA Closed: AK Date: 13/5/9

Work Order: <u>99779</u>	DISPOSITION Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS			
Part No. <u>D3295-041</u>		Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input checked="" type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
NCR No. <u>13-2585</u>					

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>	<u>BS-2</u>	<u>110</u>	<u>1</u>	<u>Found at inspection (QC)</u> <u>that part was scratch</u> <u>part scrap</u> <u>QTY ①</u>	<u>DAS</u> <u>16</u> <u>2-83</u> <u>Q72012</u> <u>13/05/03</u>	<u>part destroyed</u> <u>no record</u> <u>cut extra</u>	<u>AK</u> <u>13-5-2</u>	<u>DAS</u> <u>27</u> <u>2-83</u> <u>1352</u>	<u>(DAS)</u> <u>16</u> <u>2-83</u> <u>Q72012</u> <u>13/05/03</u>
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input checked="" type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear	General
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio
	<input type="checkbox"/> Grain
	<input type="checkbox"/> Hardware
	<input type="checkbox"/> Inspection Incomplete
	<input type="checkbox"/> Instructions Incomplete/Unclear
	<input type="checkbox"/> Maintenance
	<input type="checkbox"/> Mislabeled
	<input type="checkbox"/> Misread
	<input type="checkbox"/> Offset
	<input type="checkbox"/> Out of Calibration
	<input type="checkbox"/> Out of Sequence
	<input type="checkbox"/> Outside Dimensions
	<input type="checkbox"/> Ovalized
	<input checked="" type="checkbox"/> Over/Under tolerance
	<input type="checkbox"/> Part Incorrect
	<input type="checkbox"/> Part Lost/Missing
	<input type="checkbox"/> Part Moved
	<input type="checkbox"/> Positioned Wrong
	<input type="checkbox"/> Power Loss/Surge
	<input type="checkbox"/> Pressure/Forced
	<input type="checkbox"/> Temperature/Cure
	<input type="checkbox"/> Weld
	<input type="checkbox"/> Wrong Stock Pulled
	<input type="checkbox"/> Other

Work Order ID 99779

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99779

Page 2

Item ID: D3295-041

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Floor Window

Start Date: 4/11/13 Start Qty: 6.00

6

Cust Item ID:

Required Date: 4/11/13 Req'd Qty: 6.00

6



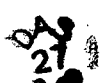
Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC8- Inspect parts - second check Memo	0.00  0.00 BS2				7	1		
130 *130* Small Fab Small Fab	Small Fab Memo Assemble as per Dwg D3295. Put window in plastic wrap.	0.00 0.00				7x			
140 *140* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00  0.00 BS3				7			

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 99779

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99779

Page 3

Item ID: D3295-041

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Floor Window

Start Date: 4/11/13 Start Qty: 6.00

6

Cust Item ID:

Required Date: 4/11/13 Req'd Qty: 6.00

6

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start ***NR1***

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	Identify as per dwg & Stock Location	0.00							
150									
Packaging	Memo	0.00				7			13-5-7
Packaging									
160	QC21- Final Inspection - Work Order Release	0.00							
160									
QC	Memo	0.00							MLJ 13-05-08
Quality Control									

13-05-8

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

April-11-13 3:39:30 PM

Page 1

Work Order ID: 99779

99779

Parent Item: D3295-041

D3295-041

Parent Item Name: Floor Window

Start Date: 4/11/13

Required Date: 4/11/13

Start Qty: 6.00

Required Qty: 6.00

Comments:

IPP C05.06.20D3295-1 no longer made in-houseKJ/JLM

IPP Rev:D Added DT8822 07-03-20 JLM

IPP Rev:E Returned Manufacturing In House 07-06-26 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.125-9034-01		Purchased	No			100	sf	168.5000	1.24	7.831579			
MI FXS 125-9034-01										**	8.0	Jm 13-5-2	
1/8" 9034 Lexan Sheet													
						<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>					
						MAT018	168.5						
						125052	168.5						
										<u>125052</u>			

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									


FAULT CATEGORY



Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

DART AEROSPACE LTD		Work Order:	99779
Description: Window		Part Number:	D3295
Inspection Dwg: D3295 Rev: E		Page 1 of 1	

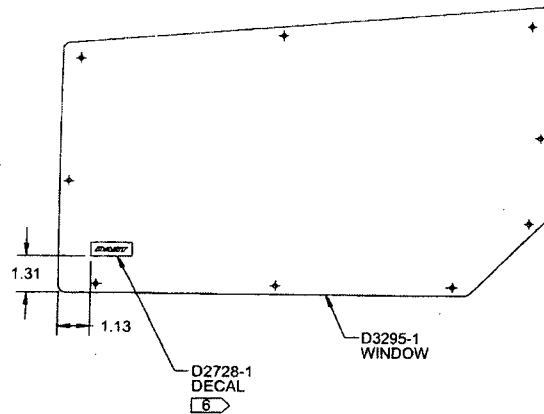
FIRST ARTICLE INSPECTION CHECKLIST

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Ø0.156	+0.005/-0.001	0.157"	✓		V	Jm01
17.13	+/-0.030	17.13"	✓		T	Jm06
10.43	+/-0.030	10.435"	✓		V	Produra2
14.35	+/-0.030	14.35"	✓		T	
8.98	+/-0.030	8.98"	✓		V	
0.625	+/-0.010	0.629"	✓		V	
7.109	+/-0.010	7.109"	✓		V	
15.845	+/-0.010	15.845"	✓		T	
2.308	+/-0.010	2.309"	✓		V	
5.420	+/-0.010	5.418"	✓		V	
9.402	+/-0.010	9.408"	✓		V	
1.312	+/-0.010	1.315"	✓		V	
6.260	+/-0.010	6.260"	✓		V	
12.520	+/-0.010	12.520"	✓		T	
0.313	+/-0.010	0.313"	✓		V	
3.750	+/-0.010	3.754"	✓		V	
8.150	+/-0.010	8.153"	✓		V	
9.006	+/-0.010	9.010"	✓		V	
0.125	+/-0.010	0.117"	✓		V	

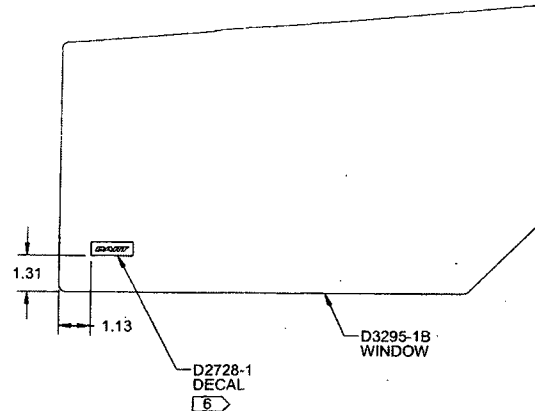
Measured by: Jm	Audited by: 	Preliminary Approval:
Date: 13-5-2	Date: 13 5 2	Date:

Rev	Date	Change	Revised by	Approved
A	07.11.23	New Issue P/O D3295-041	KJ/EC/DD	
B	13.02.27	Dwg Rev updated	KJ 	

ITEM	QTY -041	QTY -041B	P/N	DESCRIPTION
	X		D3295-041	FLOOR WINDOW
		X	D3295-041B	FLOOR WINDOW, BLANK
1	1		D3295-1	WINDOW
2		1	D3295-1B	WINDOW, BLANK
3	1	1	D2728-1	DECAL



D3295-041 FLOOR WINDOW



D3295-041B FLOOR WINDOW, BLANK

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) N/A
- 6) ENSURE SURFACE IS FREE OF DIRT/GREASE PRIOR TO APPLICATION OF SELF-ADHESIVE DECAL
- 7) WEIGHT: D3295-041/-041B = 0.87 lbs

99779 MJS
13-04-16

RELEASED
2012-11-21

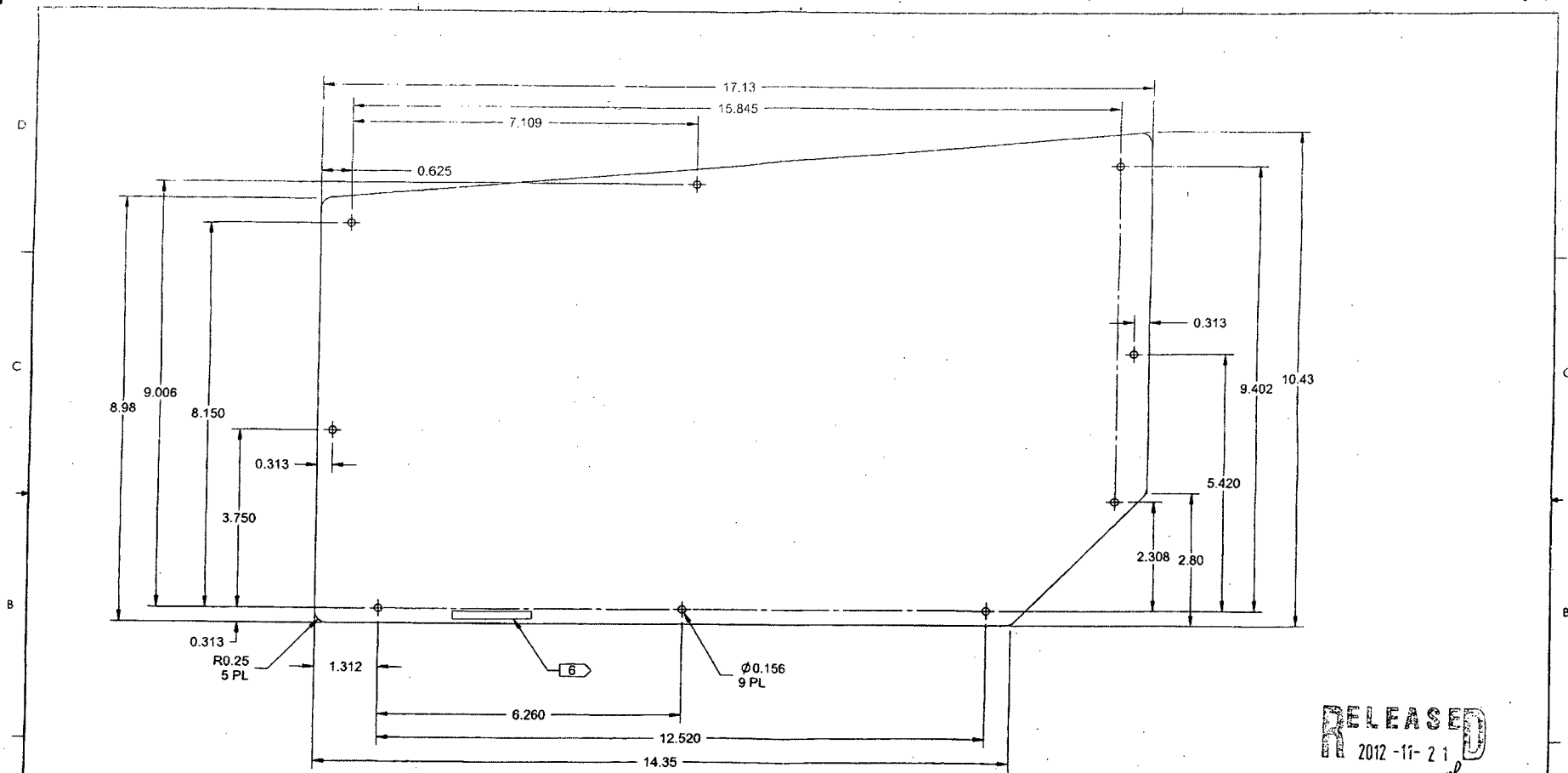
E	ADD D3295-041B/-1B. REF. PAR12-223.	MB	12.11.15
D	REVISE MATERIAL TO LEXAN 9034 FROM POLYCAST ACRYLIC SHEET. ZONE A8 SH 2 ADD MISSING DIMENSION PER NCR 247. ZONE C3 SH 2 REFORMAT DRAWING	MP	07.11.07
C	CHANGE TEMPLATE # TO DT8822	SSH	07.02.21
B	UPDATE MATERIAL PER NCR 029	CP	06.04.13
A	NEW ISSUE	CP	04.06.28
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	12.11.15		

DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D3295** REV. E
SHEET 1 OF 3
TITLE **FLOOR WINDOW** SCALE NTS

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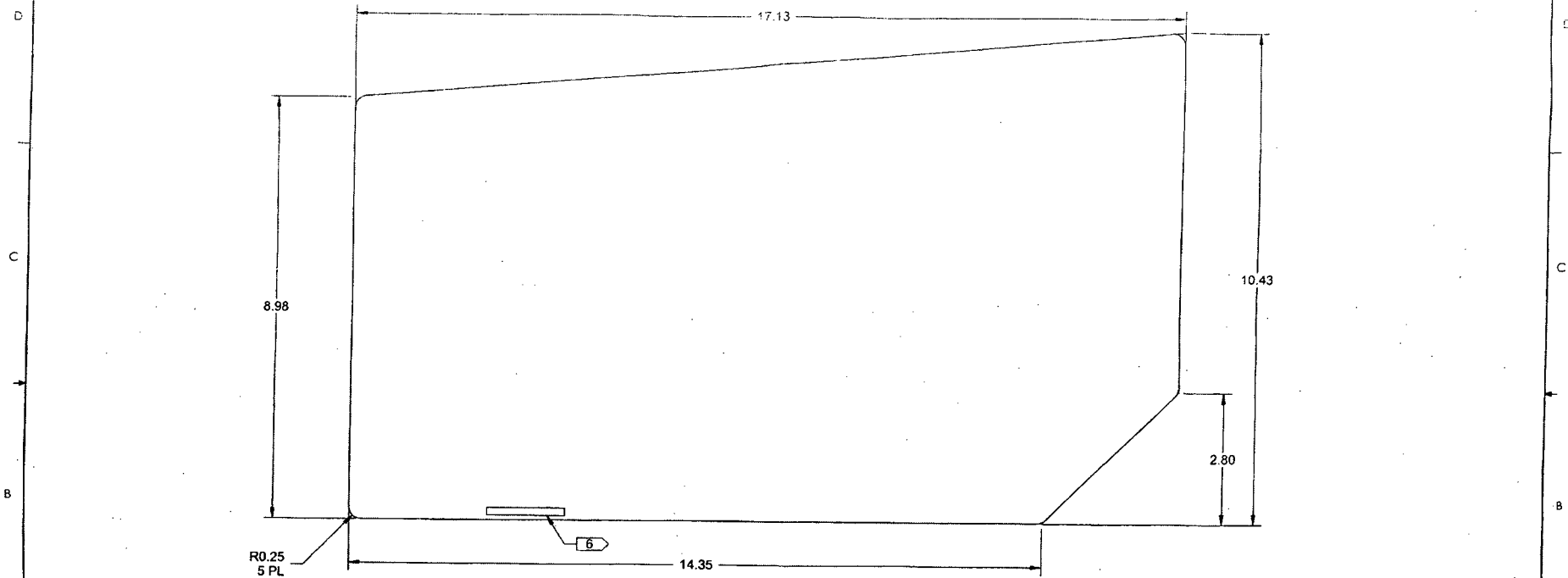
D3295-1 WINDOW

RELEASED
2012-11-21
MP

- NOTES:**
- 1) MATERIAL: LEXAN 9034, 0.125 THICK
REF DART SPEC. MLEXS.125-9034-01
 - 2) FINISH: NONE
 - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
 - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
 - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
 - 6) IDENTIFICATION: ENGRAVE WITH DART P/N "D3295-041" AND B/N "BXXXXX" PER DART QSI 044 6.4 (VIBRATING STYLUS)
USING LETTERS 0.125 TO MAX DEPTH OF 0.005. LOCATE APPROXIMATELY AS SHOWN
 - 7) WEIGHT: 0.87 lbs

DESIGN	GP	DART AEROSPACE LTD	
DRAWN	GP	HAWKESBURY, ONTARIO, CANADA	
CHECKED	GP	DRAWING NO. D3295	REV. E
MFG. APPR.	JND	SHEET 2 OF 3	
APPROVED	JND	TITLE	SCALE
DE APPR.	JND	FLOOR WINDOW	NTS
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E D3295-1B WINDOW

RELEASED
2012-11-21
JNP

- NOTES:**
- 1) MATERIAL: LEXAN 9034, 0.125 THICK
REF DART SPEC. MLEXS:125-9034-01
 - 2) FINISH: NONE
 - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
 - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
 - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
 - 6) IDENTIFICATION: ENGRAVE WITH DART P/N "D3295-041B" AND B/N "BXXXXX" PER DART QSI 044 6.4 (VIBRATING STYLUS)
USING LETTERS 0.125 TO MAX DEPTH OF 0.005. LOCATE APPROXIMATELY AS SHOWN.
 - 7) WEIGHT: 0.87 lbs

DESIGN	GP	DART AEROSPACE LTD	
DRAWN	GP	HAWKESBURY, ONTARIO, CANADA	
CHECKED	GP	DRAWING NO. D3295	REV. E
MFG. APPR.	JNP	SHEET 3 OF 3	
APPROVED	JNP	TITLE	SCALE
DE APPR.	JNP	FLOOR WINDOW	NTS
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